

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 242014US99CONT	
		First Inventor or Application Identifier James W. HARRIS	
		Title ANTI-FIRST-PASS EFFECT COMPOUNDS	

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, Virginia 22313

<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></p> <p>2. <input checked="" type="checkbox"/> Specification Total Sheets 65</p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 2</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 2</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 20px;">b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 17 completed)</small></p> <p style="margin-left: 40px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small></p> <p>5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small></p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p style="margin-left: 20px;">b. Specification or Sequence Listing on :</p> <p style="margin-left: 40px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p style="margin-left: 40px;">ii. <input type="checkbox"/> Paper</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</p>	<p style="text-align: center;">ACCOMPANYING APPLICATION PARTS</p> <p>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small></p> <p>10. <input type="checkbox"/> English Translation Document <small>(if applicable)</small></p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>15. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small></p> <p>16. <input type="checkbox"/> Other:</p>
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17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☒ Continuation
 ☐ Divisional
 ☐ Continuation-in-part (CIP)
 of prior application no.: 09/916,500
 Prior application information:
 Examiner: Covington, R.K.
 Group Art Unit: 1625

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

Customer Number

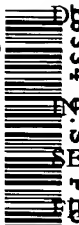
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08/26/03



Docket No. 242014US99CONT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) James W. HARRIS

SERIAL NO: New Application

FILING DATE: Herewith

FOR: ANTI-FIRST-PASS EFFECT COMPOUNDS

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	14 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$84 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
			BASIC FEE	\$750.00
			TOTAL OF ABOVE CALCULATIONS	\$750.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
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			TOTAL	\$750.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of **\$0.00** to cover the filing fee is enclosed.
- ☐ Credit card payment form is attached to cover the filing fee in the amount of **\$0.00**
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Respectfully Submitted,

OBLON, SPIVAK, MCCLELLAND,
MAIER & NEUSTADT, P.C.

Date: _____

8/26/03

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